

MT PLEASANT CENTRAL SCHOOL DISTRICT
HAWTHORNE ELEMENTARY
COLUMBUS ELEMENTARY

NUT-FREE TABLE

Re: Student: _____

Dear Parents/Guardians Of **HES** & **CES** Students:

In order to keep our students with nut allergies safe, we offer a **Nut-Free Table** in the cafeteria during your child's designated lunch time.

If your child has been diagnosed with **any peanut or tree-nut allergy**, please indicate below whether or not you wish your child to be seated at our Nut-Free Table. As always, safety is our priority and we appreciate your cooperation in this important matter. Please do not hesitate to call your School Nurse to further discuss and plan for your child's specific health needs.

_____ My child **WILL** sit at the Nut-Free Table.

_____ My child **WILL NOT** sit at the Nut-Free Table

Parent/Guardian Signature

Date